| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | <u></u> |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yoursel | f | |
|--|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. Your full name | Jerrilynn | |
| | First name | First name |
| Write the name that is on your government-issued | | |
| picture identification (for | Middle name | Middle name |
| example, your driver's | Dyson | |
| license or passport | Last name | Last name |
| Bring your picture identification to your | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| meeting with the trustee. | | |
| 2. All other names you | | |
| have used in the | First name | First name |
| last 8 years | | |
| Include your married or | Middle name | Middle name |
| maiden names. | | |
| | Last name | Last name |
| | First name | First name |
| | i iist name | i iist name |
| | Middle name | Middle name |
| | | |
| | Last name | Last name |
| 3. Only the last 4 | | |
| digits of your | XXX - XX- 6412 | XXX - XX- |
| Social Security number or federal | OR | OR |
| Individual Taxpayer | 9 xx - xx- | 9 xx - xx- |
| Identification number (ITIN) | | |

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| De | First Name | Middle Name | Last Name | _ Case Hulliber (ii knot | wii) | |
|----|---|--|--|--------------------------|--|---|
| | | | | | | |
| | | About Debtor 1: | | About Debto | or 2 (Spouse Only | / in a Joint Case): |
| 4. | Any business names and Employer | ✓ I have not used any busine | ss names or EINs. | I have not | used any business nam | nes or EINs. |
| | Identification Numbers (EIN) you have used in the | Business name | | Business nar | ne | |
| | last 8 years | Business name | Business nar | ne | | |
| | Include trade names and doing business as names | EIN | | EIN | | |
| | | EIN | | EIN | | |
| 5. | Where you live | | | If Debtor 2 liv | es at a different addr | ess: |
| | | 6506 S Evans Ave Apt 2 Number Street | | Number | Street | |
| | | Chicago Illinois | 60637 | | | |
| | | City State Cook | Zip Code | City | State | Zip Code |
| | | County | | County | | |
| | | If your mailing address is diff fill it in here. Note that the count this mailing address. | | | | erent from yours, fill it ny notices to this mailing |
| | | Number Street | | Number | Street | |
| | | City State | Zip Code | - Cit. | Chata | 7:- On de |
| _ | | City State | Zip Code | City | State | Zip Code |
| ь. | Why you are choosing this | Check one: | | Check one: | | |
| | district to file for bankruptcy | Over the last 180 days before lived in this district longer to | ore filing this petition, I have than in any other district. | | ast 180 days before filings s district longer than in | |
| | | I have another reason. Exp | olain. (See 28 U.S.C. §§ 1408.) | I have ano | ther reason. Explain. (S | see 28 U.S.C. §§ 1408.) |
| | | | | - | | |
| | | | | | | |
| | | | | | | |
| | | | | - | | |
| | | | | | | |

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| Debtor 1 Jerrilynn | | | Case number (if know | n) |
|---|--|---|---|--|
| Part 2: Tell the Cou | Middle Name rt About Your Bankrup | Last Name | | |
| 7. The chapter of the Bankruptcy Codyou are choosing file under | Check one. (For a brie B2010)). Also, go to the | • | | (b) for Individuals Filing for Bankruptcy (Form |
| 8. How you will parthe fee | court for more may pay with con your behalf. I need to pay Individuals to F I request that By law, a judge less than 150% the fee in insta | Pay Your Filing Fee in Installments (6 my fee be waived (You may reque e may, but is not required to, waive | ypically, if you a rder If your at dit card or check cose this option Official Form 10 est this option of e your fee, and oplies to your fa n, you must fill of | are paying the fee yourself, you ttorney is submitting your payment k with a pre-printed address. a, sign and attach the <i>Application for</i> 03A). The poly if you are filing for Chapter 7. The may do so only if your income is a mily size and you are unable to pay but the <i>Application to Have the</i> |
| 9. Have you filed for bankruptcy with the last 8 years? | ▼ 1 1 0. | When | MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. Are any bankrup cases pending o being filed by a spouse who is n filing this case v you, or by a business partne by an affiliate? | r Yes. Debtor ot District vith Debtor | <u>W</u> hen | | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent you residence? | Yes. Has your lar No. Go to line 12 Yes. Has your lar | andlord obtained an eviction judgment against y | | |

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| Debtor 1 Jerrilynn First Name | | Midd | | Dyson Last Name | Case number (if know | m) | |
|--|---------------|--|--|---|--|--|-------------------------------------|
| Part 3: Report About An | v Rus | | | | | | |
| 12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. | | No. | Go to Part 4. Name and location of both statements are statements and location of both statements and location of both statements are statements and location of both statements and location of both statements are statements and location of both statements and location of both statements are statements and location of bo | Street Street Street Street Street Street Street Street | 11 U.S.C. § 101(27A)) d in 11 U.S.C. § 101(51B)) § 101(53A)) | Zip Code | |
| 13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). | dead opera | llines. If y ations, ca C. § 11 1 No. | ou indicate that you are a ash-flow statement, and a 6(1)(B). I am not filing under Ch I am filing under Chapt Bankruptcy Code. | a small business deb federal income tax re napter 11. ter 11, but I am NOT | ether you are a small busine for, you must attach your mo turn or if any of these docur a small business debtor acc | ost recent balance sheet, soments do not exist, follow the control of the control of the control of the control of the definition in the definition in | statement of the procedure in 11 |
| Part 4: Report if You Ow | n or l | Have A | Any Hazardous Pro | operty or Any P | roperty That Needs I | mmediate Attentio | n |
| 14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate | | | What is the hazard? If immediate attention is r Where is the property? | needed, why is it nee | ded? Street | | |
| attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | City | State | Zip (| Code |

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Debtor 1 Jerrilynn Dyson Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of

credit counseling with the court.

about credit counseling, you must file a motion for waiver of

credit counseling with the court.

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| Debtor 1 Jerrilynn | | Oyson Case number (if know | m) | | | | |
|---|---|--|---|--|--|--|--|
| Part 6: Answer These Qu | Middle Name Luestions for Reporting Purpos | ast Name | | | | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will be availa No. Yes. | r 7. Go to line 18. Do you estimate that after any exempt property in able to distribute to unsecured creditors? | s excluded and administrative expenses are | | | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 | | | | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | | |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | | | |
| Part 7: Sign Below | | | | | | | |
| For you | and correct. If I have chosen to file under C 11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me a me fill out this document, I have I request relief in accordance of I understand making a false state. | Chapter 7, I am aware that I may proceed States Code. I understand the relief abover 7. Ind I did not pay or agree to pay some obtained and read the notice require with the chapter of title 11, United Statement, concealing property, or obtained case can result in fines up to \$250,00 to 52, 1341, 1519, and 3571. | eone who is not an attorney to help red by 11 U.S.C. § 342(b). Ites Code, specified in this petition. aining money or property by fraud in 100, or imprisonment for up to 20 of Debtor 2 | | | | |

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| Debtor 1 Jerrilynn | | Dyson | Case number (| if known) |
|---|--|--|--|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not | eligibility to proceed un the relief available und to the debtor(s) the no | nder Chapter 7, 11, der each chapter for tice required by 11 l | 12, or 13 of title 11, U which the person is e J.S.C. § 342(b) and, ir | hat I have informed the debtor(s) about nited States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, ation in the schedules filed with the |
| need to file this page. | /s/ Mark Bernachea Signature of Attorney | | Date | 9/16/2016 MM / DD / YYYY |
| | Mark Bernachea Printed name | | | |
| | Semrad Law Firm Firm name | | | |
| | 11101 S. Western Ave Street | nue | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | Contact phone | 3128374026 | Email address | mbernachea@semradlaw.com |
| | 6317545 Bar number | | Illino State | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|----------------------|--|--|--|--|
| Debtor 1 | Jerrilynn | | Dyson | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filin | g) First Name | Middle Name | Last Name | | | | |
| United States I | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| (State) | | | | | | | |
| Case number (If known) | | | | | | | |

| Check if this is an |
|---------------------|
| amended filing |

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| Part 1: Summarize Your Assets | |
|--|---|
| | Your assets Value of what you own |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$28,557.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$28,557.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$32,325.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$15,254.00 |
| Your total liabilities | \$47,579.00 |
| Part 3: Summarize Your Income and Expenses | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$1,930.78 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J | \$1,170.00 |
| | |

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| De | btor 1 | Jerrilynn | | Dyson | Case n | umber (if known) | | | | | |
|-------------|--|---|-----------------------------|-------------------------------|------------------|----------------------------|------------|--|--|--|--|
| | | First Name | Middle Name | Last Name | | | | | | | |
| Par | t 4: | Answer These Questic | ons for Administrati | ive and Statistical Re | cords | | | | | | |
| 6. | 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | | | |
| | ✓ Yes. | | | | | | | | | | |
| 7. \ | What k | ind of debt do you have? | | | | | | | | | |
| | Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. | | | | | | | | | | |
| | | our debts are not primarily is form to the court with your | | ave nothing to report on this | part of the form | a. Check this box and subm | nit | | | | |
| 8. | | the Statement of Your Cu 122A-1 Line 11; OR, Form 12 | • | 1,,, | thly income from | m Official | \$1,915.84 | | | | |
| 9. | Сор | y the following special cate | egories of claims from F | Part 4, line 6 of Schedule I | E/F: | | | | | | |
| | Fror | n Part 4 on Schedule E/F, o | copy the following: | | | Total claim | | | | | |
| | 9a. [| Domestic support obligations | (Copy line 6a.) | | | \$0.00 | | | | | |
| | 9b. T | Taxes and certain other debts | you owe the government. | (Copy line 6b.) | | \$0.00 | | | | | |
| | 9c. C | Claims for death or personal in | njury while you were intoxi | icated. (Copy line 6c.) | | \$0.00 | | | | | |
| | 9d. S | Student loans. (Copy line 6f.) | | | | \$0.00 | | | | | |
| | | Obligations arising out of a se ity claims. (Copy line 6g.) | paration agreement or div | vorce that you did not report | as | \$0.00 | | | | | |
| | 9f. D | ebts to pension or profit-shar | ar debts. (Copy line 6h.) | | \$0.00 | | | | | | |
| | 9g. 1 | Fotal. Add lines 9a through 9 | f. | | Ī | \$0.00 | | | | | |

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| Debtor 1 | | Jerrilynn | | | Dyson | | | |
|--|---------------------------------|---|---|--|--|--------------------------|--|------------------------------------|
| | | First Name | Middle N | lame | Last Name | | | |
| Debtor 2 | if filing | First Name | NA: -I-II - N | 1 | Lost Name | | | |
| (Opouse, | g, | FIRST Name | Middle N | iame | Last Name | | | |
| United St | ates Ba | ankruptcy Court for the: | Northern | | District of Illinois (State) | | | |
| Case nun (If known) | nber | | | | (State) | | | |
| Officia | al Fo | orm 106A/B | | | | | | Check if this is an amended filing |
| Sche | dul | e A/B: Prope | erty | | | | | 12/1 |
| category v responsib write your Part 1: | where le for name Desc | you think it fits best. B supplying correct info and case number (if k ribe Each Resider | e as complete and rmation. If more s nown). Answer even nce, Building, l | d accurate pace is no ery questi Land, or | Other Real Estate You | ople are f to this fo | iling together, both are orm. On the top of any a | equally |
| | | or have any legal or ed So to Part 2 | juitable interest in | any resid | lence, building, land, or similar | property | ? | |
| | | | | | | | | |
| 1.1 | | Where is the property? t address, if available, or | other description | Singl Duple Conc | the property? Check all that apperson that apperson on multi-unit building lominium or cooperative ufactured or mobile home | oly. | Do not deduct secured of the amount of any secure Creditors Who Have Clate Current value of the entire property? | |
| | Numb | | | Time | tment property share | | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | City | State | Zip Code | one. Debte | s an interest in the property? (or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and another | | Check if this is con (see instructions) | |
| | | | | | formation you wish to add abo | ut this ite | m, such as local | |
| lf v ov | | have more than one list | hara. | property | identification number: | | | |
| 1.2 | | have more than one, list taddress, if available, or | | Singl Duple | the property? Check all that apperent of the control of the contro | bly. | Do not deduct secured of the amount of any secure Creditors Who Have Clat Current value of the entire property? | |
| | | | | Manu | ufactured or mobile home | | ———— | ———— |
| | Numb | per Street State | Zip Code | | tment property share r | | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | | | | one. Debte | or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and another | | Check if this is con (see instructions) | mmunity property |
| | | | | Other in | formation you wish to add abo | | em, such as local | |

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| Debtor 1 | Jerrilynn First Name | Middle Name | Dyson Last Name | Case number | (if known) | |
|------------|--|--|--|-------------|---|--|
| 1.3Sti | eet address, if available, or oth | [| Vhat is the property? Check all that app Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | y. | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? | • |
| Nu Cit | y State | Zip Code | Land Investment property Timeshare Other | | Describe the nature of interest (such as fee si the entireties, or a life | mple, tenancy by |
| | | [[[] | Who has an interest in the property? O Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add aborroperty identification number: | | Check if this is con (see instructions) | mmunity property |
| | | tion you own for a | Il of your entries from Part 1, including | | | |
| you own to | | equitable interest ir u lease a vehicle, als | n any vehicles, whether they are regist o report it on Schedule G: Executory Contr cles | | | |
| 3.1 | Make Model: Year: | Chevrolet Impala 2015 | Who has an interest in the propert one. Debtor 1 only | y? Check | the amount of any secure | laims or exemptions. Put ed claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: used 2015 Chevrolet Impala | 30000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this is community propinstructions) | | Current value of the entire property? \$26937.00 | Current value of the portion you own? \$26937.00 |
| 3.2 | Make Model: Year: Approximate mileage: Other information: | | Who has an interest in the propert one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and | | the amount of any secure | laims or exemptions. Put ed claims on Schedule D: nims Secured by Property. Current value of the portion you own? |
| | | | Check if this is community propinstructions) | | | |

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| | First Name Middle Name | Last Name | | |
|------|--|--|--|---|
| 3.3 | Make | Who has an interest in the property? Check | | laims or exemptions. Put |
| | Model: | one. | • | ed claims on <i>Schedule D:</i> |
| | Year: | Debtor 1 only | Creditors Who Have Cla | aims Secured by Property |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and another | | |
| | | Check if this is community property (see instructions) | | |
| 3.4 | Make | Who has an interest in the property? Check | | laims or exemptions. Put |
| | Model: | one. | • | ed claims on <i>Schedule D:</i> |
| | Year: | Debtor 1 only | Creditors Who Have Cla | aims Secured by Property |
| | Approximate mileage: | Debtor 2 only | Current value of the | Current value of the |
| | Other information: | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | | At least one of the debtors and another | | |
| | | Check if this is community property (see | | |
| Exar | · · · · · · · · · · · · · · · · · · · | instructions) ther recreational vehicles, other vehicles, and accessoring the state of the state | | |
| Exar | mples: Boats, trailers, motors, personal watercra No Yes Make | instructions) ther recreational vehicles, other vehicles, and accessoring the state of the stat | es Do not deduct secured c | laims or exemptions. Put |
| Exar | mples: Boats, trailers, motors, personal watercra No Yes | instructions) ther recreational vehicles, other vehicles, and accessoring a control of the cont | Do not deduct secured conthe amount of any secure | ed claims on <i>Schedule D:</i> |
| Exar | mples: Boats, trailers, motors, personal watercra No Yes Make Model: | instructions) ther recreational vehicles, other vehicles, and accessorial fishing vessels, snowmobiles, motorcycle accessorial who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule D: aims Secured by Property |
| Exar | Make Model: Year: Approximate mileage: | instructions) ther recreational vehicles, other vehicles, and accessoring the property of the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule D: aims Secured by Property Current value of the |
| Exar | mples: Boats, trailers, motors, personal watercra No Yes Make Model: Year: | instructions) ther recreational vehicles, other vehicles, and accessority and the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule D: aims Secured by Property |
| Exar | Make Model: Year: Approximate mileage: | instructions) ther recreational vehicles, other vehicles, and access aft, fishing vessels, snowmobiles, motorcycle accessori Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule D: aims Secured by Property Current value of the |
| Exar | Make Model: Year: Approximate mileage: | instructions) ther recreational vehicles, other vehicles, and accessority and the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Cla | ed claims on Schedule D: aims Secured by Property Current value of the |
| 4.1 | Make Model: Year: Approximate mileage: | instructions) ther recreational vehicles, other vehicles, and access aft, fishing vessels, snowmobiles, motorcycle accessori Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another Check if this is community property (see | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the de | ed claims on Schedule D: aims Secured by Property Current value of the portion you own? |
| 4.1 | mples: Boats, trailers, motors, personal watercra No Yes Make Model: Year: Approximate mileage: Other information: | instructions) ther recreational vehicles, other vehicles, and accessoring accessoring the property of the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure | ed claims on Schedule D: aims Secured by Property Current value of the portion you own? daims or exemptions. Put ed claims on Schedule D: |
| 4.1 | Make Other information: | instructions) ther recreational vehicles, other vehicles, and accessority and the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure | ed claims on Schedule D: aims Secured by Property Current value of the portion you own? |
| 4.1 | Make Model: Other information: Make Model: | instructions) ther recreational vehicles, other vehicles, and accessorial accessorial vehicles, showmobiles, motorcycle accessorial vehicles, showmobiles, motorcycle accessorial vehicles, motorcycl | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classifications | ed claims on Schedule D: aims Secured by Property Current value of the portion you own? claims or exemptions. Put ed claims on Schedule D: aims Secured by Property |
| 4.1 | Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: Make Model: Year: Other information: | instructions) ther recreational vehicles, other vehicles, and access aft, fishing vessels, snowmobiles, motorcycle accessori Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure | ed claims on Schedule D: aims Secured by Property Current value of the portion you own? daims or exemptions. Put ed claims on Schedule D: |
| 4.1 | Make Model: Approximate mileage: Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: | instructions) ther recreational vehicles, other vehicles, and accessoring accessoring the property of the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the | ed claims on Schedule D: aims Secured by Property Current value of the portion you own? claims or exemptions. Put ed claims on Schedule D: aims Secured by Property Current value of the |
| 4.1 | Make Model: Approximate mileage: Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: Make Model: Year: Approximate mileage: | instructions) ther recreational vehicles, other vehicles, and accessoring accessoring the property of the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the entire property? Do not deduct secured of the amount of any secure Creditors Who Have Classification Current value of the | ed claims on Schedule D: aims Secured by Property Current value of the portion you own? claims or exemptions. Put ed claims on Schedule D: aims Secured by Property Current value of the |

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Debtor 1 Jerrilynn Case number (if known) First Name Middle Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... miscellaneous household goods and furnishings \$850.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... miscellaneous electronics \$150.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **√** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **√** No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment **√** No Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ✓ Yes. Describe... used clothing and apparel \$450.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, □ No Yes. Describe... miscellaneous costume jewelry \$150.00 13. Non-farm animals Examples: Dogs, cats, birds, horses **✓** No Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list **√** No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1600.00 for Part 3. Write that number here

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| Der | nor i Jerrilyrin | | Dyson Case number (ii known) | |
|------|---|---------------------------------------|---|--|
| | First Name | Middle Name | Last Name | |
| Part | 4: Describe Your | Financial Assets | | |
| Do | you own or have | any legal or equitable int | erest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Cash | | | |
| - | | ve in your wallet, in your home, in a | safe deposit box, and on hand when you file your petition | |
| | ✓ No | | | |
| | Yes | | | <u> </u> |
| 17. | | | s; certificates of deposit; shares in credit unions, brokerage lounts with the same institution, list each. | nouses, |
| | ✓ Yes | | Institution name: | |
| | | | | |
| | | 17.1. Checking account: | TCF Bank | \$0.00 |
| | | 17.2. Checking account: | US Employees Credit Union | \$5.00 |
| | | 17.3. Savings account: | Chicago Postal Federal Credit Union | \$10.00 |
| | | 17.4. Savings account: | US Employees Credit Union | \$5.00 |
| | | 17.5. Certificates of deposit: | | |
| | | 17.6. Other financial account: | | |
| | | 17.7. Other financial account: | | |
| | | 17.8. Other financial account: | | |
| | | 17.9. Other financial account: | | |
| 18. | | , or publicly traded stocks | | |
| | | investment accounts with brokerag | ge firms, money market accounts | |
| | ✓ No | Institution or issuer name: | | |
| | Yes | moditation of loader riame. | | |
| | | | | |
| | | | | |
| | | | | |
| 19. | Non-publicly traded s an LLC, partnership, | | ated and unincorporated businesses, including an inte | erest in |
| | ✓ No | • | | |
| | Yes. Give specific | Name of entity | % of ownership: | |
| | information about | | | |
| | them | | | |
| | | - | | |
| | | | | |

Official Form 106A/B Schedule A/B: Property page 5

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| Dep | tor 1 | | | Dyson | Case number (if known) | |
|-----|-------|------------------------|---|---------------------------------|---------------------------------------|-------|
| | | First Name | Middle Name | Last Name | | |
| 20. | | | orate bonds and other negotian clude personal checks, cashiers' | | | |
| | | | nts are those you cannot transfer | | | |
| | ✓ | No | | | | |
| | | Yes. Give specific | | | | |
| | | information about them | Issuer name: | | | |
| | | u lorri | | | | |
| | | | | | | |
| | | | | | | |
| 21. | Ref | tirement or pension | accounts | | | |
| | _ | 1 | A, ERISA, Keogh, 401(k), 403(b) | , thrift savings accounts, or | other pension or profit-sharing plans | |
| | | 1 | Type of account: | Institution name: | | |
| | Ш | Yes. List each account | 401(k) or similar plan: | | | |
| | | separately. | Pension plan: | _ | | |
| | | | IRA: | | | |
| | | | | | | |
| | | | Retirement account: | | | |
| | | | Keogh: | | | _ |
| | | | Additional account: | | | _ |
| | | | Additional account: | | | |
| 22. | | curity deposits and p | | | | |
| | | | deposits you have made so that yo with landlords, prepaid rent, public | | | |
| | | npanies, or others | | | ,, | |
| | ✓ | No | | Institution name: | | |
| | Ш | Yes | Electric: | | | |
| | | | Gas: | | | |
| | | | Heating oil: | | | |
| | | | Security deposit on rental unit: | | | |
| | | | Prepaid rent: | | | · |
| | | | Telephone: | | | • |
| | | | Water: | | | |
| | | | Rented furniture: | | | |
| | | | Other: | | | |
| | | | | | | |
| 23. | | | a periodic payment of money to y | ou, either for life or for a nu | mber of years) | |
| | | No | Issuer name and description: | | | |
| | Ш | Yes | · | | | |
| | | | | | | |
| | | | | | | |

Official Form 106A/B Schedule A/B: Property page 6

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| Debt | or 1 <u>Jerrilynn</u> First Name | Middle | e Name | Dyson Last Name | Case number (if known) | _ |
|------|--|---|-----------------------|-----------------------------|--|---|
| 24. | Interests in an | | count in a qualified | | der a qualified state tuition program | • |
| | ✓ No | nstitution name and descrip | . , , , | he records of any interes | sts.11 U.S.C. § 521(c): | |
| | <u>-</u> | | | | | |
| 25. | Trusts, equitable for | | property (other tha | n anything listed in lin | ne 1), and rights or powers | |
| | ✓ No | | | | | _ |
| | Yes. Descri | be | | | | |
| 26. | | ights, trademarks, trade net domain names, website | | | ements | |
| | ✓ No Yes. Descri | he | | | | 7 |
| | | | | | | |
| 27. | | chises, and other generaling permits, exclusive licer | | sociation holdings, liquo | r licenses, professional licenses | |
| | ✓ No Yes. Descri | be | | | | |
| | | | | | | |
| | | | | | | |
| Moı | ney or proper | ty owed to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds ow | | | | | portion you own? Do not deduct secured |
| | Tax refunds ow | ed to you | | | Federal: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds own No Yes. Give sp about to | ed to you ecific information hem, including whether eady filed the returns | | | Federal: State: | portion you own? Do not deduct secured |
| 28. | Tax refunds own No Yes. Give sp about t you alr and the | ed to you ecific information hem, including whether | | | | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds ow No Yes. Give sp about t you alr and the Family support Examples: Past of | ed to you ecific information hem, including whether eady filed the returns e tax years | pousal support, child | support, maintenance, di | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds ow No Yes. Give sp about to you alr and the Family support Examples: Past of | ed to you ecific information hem, including whether eady filed the returns e tax years | pousal support, child | support, maintenance, di | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds ow No Yes. Give sp about to you alr and the Family support Examples: Past of | ed to you ecific information hem, including whether eady filed the returns e tax years | pousal support, child | support, maintenance, di | State: Local: ivorce settlement, property settlement | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow No Yes. Give sp about to you alr and the Family support Examples: Past of | ed to you ecific information hem, including whether eady filed the returns e tax years | pousal support, child | support, maintenance, di | State: Local: ivorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow No Yes. Give sp about to you alr and the Family support Examples: Past of | ed to you ecific information hem, including whether eady filed the returns e tax years | pousal support, child | support, maintenance, di | State: Local: ivorce settlement, property settlement Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds own ✓ No Yes. Give sp about to you alroand the Family support Examples: Past of ✓ No Yes. Give sp | ect to you ecific information hem, including whether eady filed the returns e tax years | pousal support, child | support, maintenance, di | State: Local: Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow ✓ No Yes. Give sp about t you alr and the Family support Examples: Past of ✓ No Yes. Give sp Other amounts Examples: Unpair | ed to you ecific information hem, including whether eady filed the returns e tax years | ce payments, disabili | ty benefits, sick pay, vaca | State: Local: Alimony: Maintenance: Support: Divorce settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds ow ✓ No Yes. Give sp about t you alr and the Family support Examples: Past of ✓ No Yes. Give sp Other amounts Examples: Unpair | ed to you ecific information hem, including whether eady filed the returns e tax years ue or lump sum alimony, specific information | ce payments, disabili | ty benefits, sick pay, vaca | State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |

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| Deb | tor 1 Jerrilynn | Dyson | Case number (if known) | |
|------|--|--|---|--|
| | First Name Middle N | ame Last Name | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life insurance; | health savings account (HSA); credit, ho | meowner's, or renter's insurance | |
| | Yes. Name the insurance company of each policy and list its value | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property that is due you from If you are the beneficiary of a living trust, experimental because someone has died. | | r are currently entitled to receive | |
| | Yes. Describe | | | |
| 33. | Claims against third parties, whether or n Examples: Accidents, employment disputes, in | | lemand for payment | |
| | ✓ No Yes. Describe | | | |
| 34. | Other contingent and unliquidated claims to set off claims | s of every nature, including countercl | aims of the debtor and rights | |
| | ✓ No Yes. Describe | | | |
| 35. | Any financial assets you did not already lis | st | | |
| | ✓ No Yes. Describe | | | |
| 36. | Add the dollar value of all of your entries for Part 4. Write that number here | | | \$20.00 |
| Part | 5: Describe Any Business-Relate | d Property You Own or Have ar | n Interest In. List any real estate | in Part 1. |
| 37. | Do you own or have any legal or equitable | interest in any business-related prope | ertv? | |
| | No. Go to Part 6. Yes. Go to line 38. | , | C pr | urrent value of the ortion you own? o not deduct secured claims exemptions |
| 38. | Accounts receivable or commissions you No | already earned | | |
| | Yes. Describe | | | |
| 39. | Office equipment, furnishings, and suppl Examples: Business-related computers, softw | | ines, rugs, telephones, desks, chairs, electron | nic devices |
| | ✓ No Yes. Describe | | | |
| | | | | |

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| Deb | tor 1 Jerrilynn | Dyson Case number (if known) | |
|-------|-----------------------------------|---|---|
| 40. | First Name Machinery fixtures of | Middle Name Last Name quipment, supplies you use in business, and tools of your trade | |
| 40. | _ | quipment, supplies you use in business, and tools of your trade | |
| | ✓ No Yes. Describe | | |
| | Teo. Describe | | |
| | | | |
| 41. | Inventory | | |
| | ✓ No | | |
| | Yes. Describe | | |
| | | | |
| 42. | Interests in partnersh | ips or joint ventures | |
| | ✓ No | Name of entity: % of ownership: | |
| | Yes. Give specific | Name of entity. 76 of ownership. | |
| | information about them | | |
| | | | |
| | | | |
| 43. (| Customer lists, mailing | lists, or other compilations | |
| | ✓ No | | |
| | Yes. Do your lists in | aclude personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| | ☐ No | | |
| | Yes. Desc | ribe | |
| 44 | Amy by siness related | nyanantu vasu did nat alva du liat | |
| 44. | | property you did not already list | |
| | ✓ No | | |
| | Yes. Give specific information | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | Ill of your entries from Part 5, including any entries for pages you have attached r here | |
| | | | 1 |
| Part | | Farm- and Commercial Fishing-Related Property You Own or Have an Interest I n interest in farmland, list it in Part 1. | n. |
| 46. | Do you own or have a | any legal or equitable interest in any farm- or commercial fishing-related property? | |
| | ✓ No. Go to Part 7. | | Current value of the |
| | Yes. Go to line 47. | | portion you own? Do not deduct secured |
| | _ | | claims |
| 47 | Farm animals | | or exemptions |
| 4/. | Examples: Livestock, po | oultry, farm-raised fish | |
| | √ No | | |
| | Yes. Describe | | |
| | _ | | |

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| Debt | or 1 | Jerrilynn First Name | Middle Nome | Dyson | Case number (if known) | |
|--------------|----------|--------------------------|---|---------------------------|--------------------------------|--------------|
| 10 | Cro | pps-either growing o | Middle Name | Last Name | | |
| 48. | _ | | narvesteu | | | |
| | | No Yan Danariba | | | | |
| | Ш | Yes. Describe | | | | |
| | - | | | | · | |
| 49. | Far | m and fishing equipr | nent, implements, machinery, fix | tures, and tools of trade | • | |
| | ✓ | No | | | | |
| | | Yes. Describe | | | | |
| | _ | | | | | |
| 50. | Far | m and fishing suppli | es, chemicals, and feed | | | |
| | V | No | | | | |
| | Ħ | Yes. Describe | | | | |
| | | | | | | |
| 51. | Δnv | farm- and commerc | ial fishing-related property you di | id not already list | | |
| 01. | | No | an norming rotation property you as | ia not anouay not | | |
| | | Yes. Describe | | | | |
| | ч | ics. Describe | | | | |
| | - | | | | Г | |
| | | | of your entries from Part 6, includ | | | |
| for Pa | art 6. | Write that number h | ere | | > | |
| | | | | | | |
| | | | | | | |
| Part | | | perty You Own or Have an lerty of any kind you did not alread | | Did Not List Above | |
| 55. | | | country club membership | ay list? | | |
| | ✓ | No | | | | 7 |
| | П | Yes. Give specific | | | | |
| | | information | | | | |
| | | L | | | | |
| | | | | | | |
| 54. A | dd th | ne dollar value of all o | of your entries from Part 7. Write | that number here | | |
| | | | | | | |
| | | | | | | |
| Part | 8: | List the Totals of | Each Part of this Form | | | |
| 55 F | Part 1 | l· Total real estate lir | ne 2 | | • | |
| 00.1 | | rotar roar octato, iii | | | • | |
| 56. p | art 2 | 2 total vehicles, line 5 | | \$26937.00 | _ | |
| 57. P | art 3 | : Total personal and | household items, line 15 | \$1600.00 | | |
| 58. P | art 4 | : Total financial asse | s, line 36 | \$20.00 | <u> </u> | |
| 59. F | art 5 | 5: Total business-rela | ited property, line 45 | Ψ20.00 | _ | |
| 60. F | Part 6 | 6: Total farm- and fis | hing-related property, line 52 | | _ | |
| | | 7: Total other propert | | | <u> </u> | |
| | | | | | | |
| υ∠. I | otal | personal property. A | dd lines 56 through 61 | \$28557.00 | Copy personal property total ▶ | + \$28557.00 |
| | | | | | Copy position proporty total P | |
| | | | | | | |
| 62 T | ntal : | of all property on Sol | nedule A/B. Add line 55 + line 62 | | | \$28557.00 |

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| Fill in this info | ormation to identify your cas | e: | | |
|--------------------------|-------------------------------|-------------|------------------------------|--|
| Debtor 1 | Jerrilynn | | Dyson | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if fi | ling) First Name | Middle Name | Last Name | |
| United States | s Bankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case numbe (If known) | er | | (State) | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Par | Identify the Property You Cla | im as Exempt | | | | | | | |
|-----|---|---|---|------------------------------------|--|--|--|--|--|
| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | | | |
| 2. | For any property you list on Schedule A | /B that you claim as e | xempt, fill in the information below. | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption | | | | | |
| | Brief description: used clothing and apparel Line from Schedule A/B: 11 | \$450.00 | \$450.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(a) | | | | | |
| | Brief description: miscellaneous household goods and furnishings Line from Schedule A/B: 06 | \$850.00 | \$350.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) | | | | | |
| 3. | Are you claiming a homestead exemptio (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property covered No Official | r 3 years after that for ca | | page 1 | | | | | |

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Debtor 1 Jerrilynn Dyson Case number (if known) First Name Middle Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you Check only one box for each exemption. property own Copy the value from Schedule A/B 735 ILCS 5/12-1001(b) Brief \$0.00 **✓** description: **TCF Bank** 100% of fair market value, up to any applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$10.00 ✓ description: \$10.00 Chicago Postal Federal 100% of fair market value, up to any **Credit Union** applicable statutory limit Line from Schedule A/B: 17 Brief 735 ILCS 5/12-1001(b) \$5.00 **✓** description: \$5.00 **US Employees Credit** 100% of fair market value, up to any Union applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$5.00 **V** description: \$5.00 **US Employees Credit** 100% of fair market value, up to any Union applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$150.00 description: **✓** \$150.00 miscellaneous 100% of fair market value, up to any electronics applicable statutory limit Line from Schedule A/B: 07 Brief 735 ILCS 5/12-1001(b) \$150.00 description: \$150.00 miscellaneous costume 100% of fair market value, up to any jewelry applicable statutory limit Line from Schedule A/B: 12 Brief 735 ILCS 5/12-1001(c) \$26,937.00 ✓ description: Chevrolet, Impala, 2015, 100% of fair market value, up to any used 2015 Chevrolet applicable statutory limit Impala Line from

Schedule A/B:

03

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| Fill in | this inform | ation to identify your case: | | | | | |
|-----------------|------------------|---|----------------------------------|---|--------------------------|------------------------|---------------------|
| 5.1. | 4 | | | 0 | | | |
| Debte | or 1 | Jerrilynn First Name | Middle Name | Dyson Last Name | | | |
| Dalet | 0 | Filst Name | Middle Name | Lastiname | | | |
| Debte (Spot | | First Name | Middle Name | Last Name | | | |
| Unite | d States Ba | ankruptcy Court for the: | Northern | District of Illinois | | | |
| Case (If knd | number | _ | | (State) | | | |
| ` | , | 400D | | | | П | Check if this is ar |
| | | Form 106D | oro Who Ho | va Claima Saaur | ad by Dra | | mended filing |
| | | | | ve Claims Secur | | | 12/1 |
| | | | | are filing together, both are equal | | | |
| • | | i, copy the Additional Pa er (if known). | ige, fill it out, number the | e entries, and attach it to this form | i. On the top of any | additional pages, writ | e your name |
| | | • | ood by your managers? | | | | |
| 1. | | editors have claims secu | | and the second of the March are selling | alanda sasan atau dida t | | |
| | | | · | ur other schedules. You have nothing | else to report on this t | orm. | |
| | ✓ Yes. F | ill in all of the information b | elow. | | | | |
| Part ' | 1: List | All Secured Claims | | | | | |
| 2. | List all se | ecured claims. If a creditor | r has more than one secur | ed claim, list the creditor separately | Column A | Column B | Column C |
| | | | | list the other creditors in Part 2. As | Amount of claim | Value of | Unsecured |
| | much as p | oossible, list the claims in a | alphabetical order accordin | ng to the creditor's name. | Do not deduct the | collateral | portion |
| | | | | | value of collateral. | that supports | If any |
| | | | | | | this claim | |
| 2.1 | ALLY FIN | | Describe the preparty (| hat accuracy the alaims | \$31,825.00 | \$26,937.00 | \$4,888.00 |
| | Creditor's | Name AISSANCE CTR | Describe the property t | nat secures the claim: | | | |
| | Numbe | | 072 Automobile | | | | |
| | | | | the claim is: Check all that apply. | | | |
| | DETROIT | Γ Michigan 48243 | Contingent | | | | |
| | City | State ZIP Code | Unliquidated | | | | |
| | | es the debt? Check one. | Disputed | | | | |
| | | or 1 only | Nature of lien. Check al | l that apply. | | | |
| | | or 2 only or 1 and Debtor 2 only | An agreement you m | nade (such as mortgage or secured | | | |
| | | ast one of the debtors and | _ ′ | as tax lien, mechanic's lien) | | | |
| | anoth | er k if this claim relates | Judgment lien from a | a lawsuit | | | |
| | to a | community debt | Other (including a rig | ght to offset) | | | |
| | Date debincurred | t was <u>8/1/2015</u> | Last 4 digits of accour | at number 0707 | | | |
| 20 | | ve Leasing | Last 4 digits of accoun | | ФE00.00 | Фого оо | \$0.00 |
| 2.2 | Creditor's | V | Describe the property t | | \$500.00 | \$850.00 | \$0.00 |
| | 100 | er Street | miscellaneous househole \$850.00 | d goods and furnishings Value: | | | |
| | Numbe | er Street | As of the date you file, | the claim is: Check all that apply. | | | |
| | | | Contingent | | | | |
| | South Jordan | Utah 84095 | Unliquidated | | | | |
| | City | State ZIP Code | Disputed | | | | |
| | | es the debt? Check one. | Nature of lien. Check al | I that apply | | | |
| | | or 1 only | _ | , | | | |
| | | or 2 only | An agreement you m car loan) | nade (such as mortgage or secured | | | |
| | | or 1 and Debtor 2 only | | as tax lien, mechanic's lien) | | | |
| | At lea | ast one of the debtors and | Judgment lien from a | , | | | |
| | | k if this claim relates | Other (including a rig | | | | |
| | to a | community debt | | · | | | |
| | Date deb | t was | Last 4 digits of accour | nt number | | | |
| | | Add the dollar value of y number here: | our entries in Column A | on this page. Write that | \$32,325.00 | | |

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| Fill i | n this inform | ation to identify your cas | e: | | | | | |
|-------------------------|---|--|--|--|---|---|---|---|
| Deb | tor 1 | Jerrilynn | | Dyson | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | tor 2 | First Name | Middle Name | Last Name | | | | |
| (Opt | use, ii iiiiig |) FIISt Name | ivildale marrie | Last Name | | | | |
| Unit | ed States Ba | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| Cas | e number | | | (State) | | | | |
| (If kn | own) | | | | | | | |
| Off | icial F | orm 106E/F | | | | Ch | neck if this is a | n amended filing |
| <u>Sc</u> | hodu | In E/E: Cro | ditors Who | Have Unsec | urod Claime | | | |
| <u> </u> | Heau | ile E/F. Cre | cultors willo | nave unsec | ureu Ciaiilis | | | 12/15 |
| party 106A that a | to any exe /B) and on are listed in es in the bo | cutory contracts or un Schedule G: Executor Schedule D: Creditor | expired leases that could reprised in the court of the co | rs with PRIORITY claims an result in a claim. Also list end the Leases (Official Form 106 red by Property. If more spoot this page. On the top of a | xecutory contracts on <i>Sch</i> 6G). Do not include any cre ace is needed, copy the Pa | nedule A/E editors wit art you ne | B: Property (O h partially sed ed, fill it out, i | official Form cured claims number the |
| Part | 1: List / | All of Your PRIORIT | TY Unsecured Claims | 3 | | | | |
| 1. | Do any cre | editors have priority un | nsecured claims against yo | ou? | | | | |
| | ✓ No. G | o to Part 2. | | | | | | |
| | Yes. | | | | | | | |
| 2. | listed, identi much as po Continuation | tify what type of claim it is ossible, list the claims in a on Page of Part 1. If more | If a claim has both priority a alphabetical order according e than one creditor holds a p | ore than one priority unsecure and nonpriority amounts, list the to the creditor's name. If you particular claim, list the other of | nat claim here and show both have more than two priority creditors in Part 3. | n priority an | d nonpriority a | mounts. As |
| | (1 OI all CA | planation of cacin type of | claim, see the instructions to | r this form in the instruction b | ooklet.) | | | |

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| Debto | | Son Case number (if known) | |
|--------|---|---|-------------------------------|
| Part 2 | | | |
| | Do any creditors have nonpriority unsecured claims against you | | |
| 1 | No. You have nothing to report in this part. Submit this form to the | | |
| 1 | ✓ Yes. | | |
| | unsecured claim, list the creditor separately for each claim. For each of fmore than one creditor holds a particular claim, list the other creditor | order of the creditor who holds each claim. If a creditor has more the claim listed, identify what type of claim it is. Do not list claims already incirs in Part 3.If you have more than four priority unsecured claims fill out the | luded in Part 1. |
| | Page of Part 2. | | Total alaim |
| 4.1 | Capital One | | Total claim \$3,033.00 |
| 4.1 | Nonpriority Creditor's Name | Last 4 digits of account number 0917 | \$3,033.00 |
| | PO Box 71083 Number Street | When was the debt incurred? 6/1/2012 | |
| | POC Notice: Amanda Matchett | As of the date you file, the claim is: Check all that apply. | |
| | Charlotte North Carolina 28272 | Contingent | |
| | City State Zip Code Who incurred the debt? Check one. | Unliquidated | |
| | Debtor 1 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify <u>CreditCard</u> | |
| | ✓ No | | |
| 40 | Yes | | |
| 4.2 | cb/carson Nonpriority Creditor's Name | Last 4 digits of account number1110 | \$1,424.00 |
| | PO BOX 15521 Number Street | When was the debt incurred? 6/1/2014 | |
| | Trained Street | As of the date you file, the claim is: Check all that apply. | |
| | Wilmington Delaware 19805 | Contingent | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans Obligations origing out of a congretion agreement or diverse | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ Other. Specify <u>CreditCard</u> | |
| | ✓ No ☐ Yes | _ | |
| 4.3 | CBE GROUP | | \$537.00 |
| 4.3 | Nonpriority Creditor's Name | Last 4 digits of account number 0018 | φ337.00 |
| | 131 TOWE PARK DR SUITE 1 Number Street | When was the debt incurred? 6/1/2016 | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | WATERLOO lowa 50702 | Contingent | |
| | City State Zip Code Who incurred the debt? Check one. | Unliquidated Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | ✓ 001 Collection; Collecting for | |
| | Yes | ORIGINAL CREDITOR: Other. Specify <u>DIRECTV EARLY DEFAULT</u> | |

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Debtor 1 Jerrilynn Dyson Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 City of Chicago Parking \$300.00 Last 4 digits of account number _ Nonpriority Creditor's Name 121 N. LaSalle St # 107A When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Illinois 60602 Chicago Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify_ parking tickets **✓** No Yes 4.5 Comcast \$1,800.00 Last 4 digits of account number Nonpriority Creditor's Name 11621 E. Marginal Way # 5 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Bankruptcy Dept Contingent 98168 Seattle Washington Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? cable Other. Specify ☐ No **✓** Yes **COMENITY BANK/CARSONS** 4.6 \$1,424.00 Last 4 digits of account number _ Nonpriority Creditor's Name 1314 PINELOG ROAD When was the debt incurred? 6/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent **AIKEN** South Carolina 29803 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify ____ CreditCard **✓** No

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Debtor 1 Jerrilynn Dyson Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** DISCOVER FIN SVCS LLC 4.7 \$1,653.00 Last 4 digits of account number Nonpriority Creditor's Name PO <u>BOX 15316</u> When was the debt incurred? 7/1/2013 Number As of the date you file, the claim is: Check all that apply. Contingent WILMINGTON 19850 Delaware Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard Other. Specify_ **✓** No Yes **DISCOVERBANK** 4.8 \$1,653.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 7/1/2013 POB 15316 Number Street As of the date you file, the claim is: Check all that apply. Contingent WILMINGTON 19850 Delaware Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? CreditCard Other. Specify **✓** No Yes KAY JEWELERS 4.9 \$655.00 Last 4 digits of account number Nonpriority Creditor's Name 375 GHENT RD When was the debt incurred? 6/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent **FAIRLAWN** Ohio 44333 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify _ CreditCard **✓** No

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Debtor 1 Jerrilynn Dyson Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 KAY JEWELERS \$655.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 375 GHENT RD Number As of the date you file, the claim is: Check all that apply. Contingent **FAIRLAWN** Ohio 44333 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify CreditCard **✓** No Yes KOHLS/CAPONE 4.11 \$524.00 Last 4 digits of account number 4457 Nonpriority Creditor's Name PO Box 3004 When was the debt incurred? 3/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent 53201 Milwaukee Wisconsin Unliquidated Citv Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only **|~**| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard ✓ Other. Specify **✓** No Yes 4.12 KOHLS/CAPONE \$524.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 3004 When was the debt incurred? 3/1/2014 Number As of the date you file, the claim is: Check all that apply. Contingent Milwaukee Wisconsin 53201 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify _ CreditCard **✓** No

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Debtor 1 Jerrilynn Dyson Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** PEOPLES ENGY 4.13 \$165.00 Last 4 digits of account number Nonpriority Creditor's Name 200 EAST RANDOLPH When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** Illinois 60601 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify InstallmentLoan **✓** No Yes PEOPLES ENGY 4.14 \$46.00 Last 4 digits of account number Nonpriority Creditor's Name 200 EAST RANDOLPH When was the debt incurred? 7/1/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **CHICAGO** 60601 Illinois Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? InstallmentLoan ✓ Other. Specify **✓** No Yes 4.15 Peoples Gas \$160.00 Last 4 digits of account number _ Nonpriority Creditor's Name 200 E. Randolph When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Illinois 60601 Chicago Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify _ gas bill

✓ No Yes

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Debtor 1 Jerrilynn Dyson Case number (if known) First Name Middle Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page Part 2: After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 PLS Loan Store \$700.00 Last 4 digits of account number Nonpriority Creditor's Name 801 1/2 N Pulaski Rd When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Illinois Chicago 60651 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify payday loan **✓** No Yes Rush Hospital 4.17 \$1.00 Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 1700 W Van Buren # 161 Number As of the date you file, the claim is: Check all that apply. Contingent Illinois 60612 Chicago Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? ✓ Other. Specify ____ medical **✓** No

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Jerrilynn Debtor 1 Dyson Case number (if known) First Name Middle Name Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government 6b. 6c. Claims for death or personal injury while you were \$0.00 intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans 6f. from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims

\$15,254.00

\$15,254.00

6j.

6h. Debts to pension or profit-sharing plans, and other similar 6h.

6i. Other. Add all other nonpriority unsecured claims. Write

that amount here.

6j. Total. Add lines 6f through 6i.

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| Fill in this info | ormation to identify your cas | e: | | | | |
|---|-------------------------------|-------------|-----------|--|--|--|
| Debtor 1 Jerrilynn Dyson | | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if fil | ing) First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: Northern District of Illinois | | | | | | |
| | | | (State) | | | |
| Case number | | | | | | |
| (If known) | | | | | | |

| | Official | For | m 1 | 06G |
|--|----------|-----|-----|-----|
|--|----------|-----|-----|-----|

| Check if this is an |
|---------------------|
| amended filing |

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or company with whom you have the contract or lease | | | State what the contract or lease is for |
|-----|--|--------|-------------------|---|
| 2.1 | FNP Management Name 6506 S Evans Ave Apt 2 | | | Residential Lease, Debtor is Lessee, Residential Yearly Lease |
| | Number Chicago City | Street | 60637 Zip Code | |

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| Fill in this info | ormation to identify your cas | se: | | |
|----------------------------|---|--|--|---|
| Debtor 1 | Jerrilynn | | Dyson | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | ling) = | | | |
| (Spouse, if fil | ling) First Name | Middle Name | Last Name | |
| United States | s Bankruptcy Court for the: | Northern | District of Illinois | |
| 0 | _ | | (State) | |
| Case numbe (If known) | <u> </u> | | | |
| | | | | Check if this is ar |
| | | | | amended filing |
| Official | Form 106H | | | |
| | _ | | | |
| Schedi | ule H: Your C | odebtors | | 12/15 |
| Yes 2. Within t Idaho, Lc | s: the last 8 years, have you ouisiana, Nevada, New Mex b. Go to line 3. s. Did your spouse, former s | lived in a community propince, Puerto Rico, Texas, Was | shington, and Wisconsin.) re with you at the time? | debtor.) mmunity property states and territories include Arizona, California, the name and current address of that person. |
| | Name of your spouse, f | ormer spouse, or legal equiv | alent | _ |
| | Number Street | | | _ |
| | City | State | Zip Code | _ |
| again as | s a codebtor only if that p | erson is a guarantor or co | signer. Make sure you hav | our spouse is filing with you. List the person shown in line 2 re listed the creditor on <i>Schedule D</i> (Official Form 106D), rele D, <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2. |
| Column | 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt |

Official Form 106H Schedule H: Your Codebtors page 1

Check all schedules that apply:

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| Fill in this | information to identif | y your case: | | | | | |
|------------------------------|---|---|--------------------------------|-------------------|-------------------|--|------------------------------|
| Debtor 1 | Jerrilynn | | Dyson | | | | |
| | First Name | Middle Name | Last Nam | ne | | Check if this is: | |
| Debtor 2 (Spouse, if fili | ing) First Name | Middle Name | Last Nam | 16 | _ | An amended filing | |
| | | | | | | | ing post-petition chapter 13 |
| United States | Bankruptcy Court for the: | Northern | District of Illino (Stat | | _ | expenses as of the f | |
| Case number | r | | (| , | _ | M4 / DD / \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | <u>—</u> |
| (II KHOWH) | | | | | | MM / DD / YYYY | |
| Official | Form 106I | | | | | | |
| Schedu | ule I: Your Inc | ome | | | | | 12/15 |
| additional | | r spouse. If more spa ame and case number ent | | | | | n the top of any |
| 1. Fi | ill in your employment | | Debtor 1 | | | Debtor 2 | |
| in | formation. | Employment status | ✓ Employed | | | Employed | |
| | you have more than one | | Not Employed | | | Not Employed | |
| jol att | tach a separate page with | | _ | ,,,,, | | totployed | |
| | formation about additional mployers. | Occupation | mail handler | | | _ | |
| | clude part time, seasonal, | Employer's name | USPS | | | _ | |
| or | | Employer's address | 230 Northgate Number Street | e St | | Number Street | |
| | ccupation may include | | | | | | |
| | udent homemaker, if it applies. | | Laba Farrat | III' '- | 00045 | | |
| | | | Lake Forest City | Illinois State | 60045 Zip Code | City | State Zip Code |
| | | How long employed there? | 2 years 11 mg | | · | | _ |
| Estimate m you are sepa | arated. Ir non-filing spouse have mo | Monthly Income date you file this form. If your one than one employer, combined the complex of | | | | | |
| attach a sep | varate sheet to this form. | | | For D | ebtor 1 | For Debtor 2 or non-filing spouse | |
| | | ry, and commissions (before alculate what the monthly wage | | | \$2,441.23 | | _ |
| 3. Estima | ate and list monthly over | time pay. | 3. | | + \$0.00 | | |

\$2,441.23

4. Calculate gross income. Add line 2 + line 3.

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| Depto | | | Dyson | Case number | (if known) | |
|-----------------------|---|--|-----------------------|----------------------------|-----------------------------------|-------------------------|
| | First Name | Middle Name | Last Name | For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Cop | y line 4 here | | 4. | \$2,441.23 | | |
| | all payroll deductions: | | | | | |
| | Tax, Medicare, and Socia | al Security deductions | 5a. | \$462.78 | | |
| 5b. | Mandatory contribution | s for retirement plans | 5b. | \$0.00 | | |
| 5c. | Voluntary contributions | for retirement plans | 5c. | \$0.00 | | |
| 5d. | Required repayments of | retirement fund loans | 5d. | \$0.00 | | |
| 5e. | Insurance | | 5e. | \$0.00 | | |
| 5f. l | Domestic support obliga | ations | 5f. | \$0.00 | | |
| 5g. | Union dues | | 5g. | \$47.67 | | |
| 5h. | Other deductions. Specif | fy: | _ 5h. + | \$0.00 + | | |
| 6. Add +5h. | the payroll deductions. | Add lines 5a + 5b + 5c + 5d + 5e +5f | + 5g 6. | \$510.4 <u>5</u> | | |
| 7. Cald | culate total monthly take- | -home pay. Subtract line 6 from line 4 | 1. 7. | \$1,930.78 | | |
| 8. List | all other income regularl | y received: | | | | |
| | business, profession, or | | | | | |
| | | h property and business showing grosssary business expenses, and the tot | | \$0.00 | | |
| 8b. | Interest and dividends | | 8b. | \$0.00 | | |
| | dependent regularly receinclude alimony, spousal su | upport, child support, maintenance, | ·a | | | |
| | divorce settlement, and pro | • • | 8c. | \$0.00 | | |
| 8d. | Unemployment compen | sation | 8d. | \$0.00 | | |
| | Social Security | | 8e. | \$0.00 | | |
| | Include cash assistance and assistance that you receive the Supplemental Nutrition subsidies | ance that you regularly receive d the value (if known) of any non-cash , such as food stamps (benefits under Assistance Program) or housing | | # 0.00 | | |
| | . , | | | \$0.00 | | |
| · | Pension or retirement in | | 8g. | \$0.00 | | |
| | | Specify: | Г | \$0.00 + | | |
| 9. Add | all other income Add line | es 8a + 8b + 8c + 8d + 8e + 8f +8g + | 8h. 9. <u> </u> | \$0.00 | | |
| | culate monthly income. At the entries in line 10 for D | Add line 7 + line 9. Debtor 1 and Debtor 2 or non-filing spo | 10. ouse | \$1,930.78 + | = | \$1,930.78 |
| Incl rela | ude contributions from an u atives. | ributions to the expenses that you inmarried partner, members of your hoready included in lines 2-10 or amount | ousehold, your depe | ndents, your roommates | , | |
| Spe | ecify: | | | | 11 | . + \$0.00 |
| | | column of line 10 to the amount in | | | | 2. \$1,930.78 |
| VVII | te that amount on the Sumr | mary of Schedules and Statistical Sum | nmary or Certain Lia. | ollities and Related Data, | , іг іт арріles | Combined monthly income |
| 13. Do | you expect an increase o | or decrease within the year after yo | ou file this form? | | | monuny moonie |
| L | Yes. Explain: | | | | | |

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| Fill in this inform | nation to identify yo | AIL COCO. | | | |
|------------------------|---|---|---------------------------------------|----------------------|--------------------------------|
| FIII III UIIS IIIIOIII | lation to identity yo | ui case. | | | |
| Debtor 1 | Jerrilynn First Name | Middle Name | Dyson Last Name | | |
| Debtor 2 | i iist ivaille | Wildlie Harrie | Lastivaine | Check if this is: | |
| (Spouse, if filing | First Name | Middle Name | Last Name | An amended filin | a |
| United States B | ankruptcy Court for | r the: Northern | District of Illinois | = | owing post-petition chapter 13 |
| | ., .,, | | (State) | | he following date: |
| Case number (If known) | | | _ | | |
| | | | | MM / DD / YYY | Y |
| Official I | Form 106 | <u>5J</u> | | | |
| Schedul | e J: Your | Expenses | | | 12/1 |
| | | possible. If two married people are | e filing together, both are equally r | esponsible for suppl | ving correct |
| information. If r | nore space is nee | eded, attach another sheet to this | | | |
| | wer every questio | | | | |
| | ribe Your Hou | ısehold | | | |
| 1. Is this a join | t case? | | | | |
| ✓ No. Go | to line 2 | | | | |
| Yes. Do | es Debtor 2 live i | n a separate household? | | | |
| Г | No | | | | |
| | ■ Yes. Debtor 2 m | ust file Official Forms 106J-2, Expens | ses for Separate Household of Debtor | r2. | |
| 2. Do you have | - | No | | | |
| dependents? | • | | | | |
| Do not list De | ebtor 1 and | Yes. Fill out this information for | Dependent's relationship to | Dependent's | Does dependent live |
| Debtor 2. | | each dependent | Debtor 1 or Debtor 2 | age | with you? |
| | | | Child | 5 years | Yes. |
| | | | Child | 2 years | No. |
| | | | | | Yes. |
| | enses include | ZI No | | | |
| expenses of | f people other | ✓ No | | | |
| yourself and | - | Yes | | | |
| dependents | i? | | | | |
| Part 2: Estir | nate Your Ong | oing Monthly Expenses | | | |
| Estimate your | expenses as of y | our bankruptcy filing date unless y | ou are using this form as a supple | ement in a Chapter 1 | 3 case to report |
| | of a date after the | bankruptcy is filed. If this is a sup | | | |
| Include expen | ses paid for with | non-cash government assistance | if you know the value of | | |
| such assistan | ce and have inclu | ided it on Schedule I: Your Income | e (Official Form B 106l.) | | Your expenses |
| | or home ownersh r the ground or lot. | ip expenses for your residence. Inc 4. | clude first mortgage payments and | | *450.00 4. |
| If not inclu | uded in line 4: | | | | |
| 4a. Real es | state taxes | | | | 4a \$0.00 |
| 4b. Propert | y, homeowner's, or | renter's insurance | | | 4b. \$0.00 |
| 4c. Home r | naintenance, repair | , and upkeep expenses | | | 4c. \$0.00 |
| 4d. Homeo | wner's association | or condominium dues | | | 4d. \$0.00 |

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Debtor 1

Jerrilynn Dyson Case number (if known) First Name Middle Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$40.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$50.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$280.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$100.00 10. Personal care products and services \$50.00 10. 11. Medical and dental expenses \$0.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$100.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$100.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

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| Debtor 1 | Jerrilynn | | Dyson | Case number (if known) | | |
|-------------------|--------------------------|--------------------------------------|---------------------------------|------------------------|-----|------------|
| | First Name | Middle Name | Last Name | | | |
| 21.Other | Specify: | | | | 21 | \$0.00 |
| | | | | | | |
| 22. Calc u | ılate your monthly ex | penses. | | | | \$1,170.00 |
| 22a. <i>A</i> | add lines 4 through 21. | | | | | \$0.00 |
| 22b. C | Copy line 22 (monthly e | expenses for Debtor 2), if any, fro | om Official Form 106J-2 | | | \$1,170.00 |
| 22c. A | dd line 22a and 22b. T | he result is your monthly expens | ses. | | 22. | |
| 23.Calcu | late your monthly ne | et income. | | | | |
| 23a. C | Copy line 12 (your comb | oined monthly income) from Sch | nedule I. | | 23a | \$1,930.78 |
| 23b. C | Copy your monthly expe | enses from line 22 above. | | | 23b | \$1,170.00 |
| 23c S | Subtract your monthly ex | xpenses from your monthly inco | me | | | |
| | The result is your mont | | no. | | 23c | \$760.78 |
| | | | | | | |
| 24. Do y o | ou expect an increase | e or decrease in your expens | es within the year after you | ı file this form? | | |
| Fore | example, do you expect | t to finish paying for your car loar | n within the year or do you ex | pect your | | |
| mort | gage payment to increa | ase or decrease because of a n | nodification to the terms of yo | our mortgage? | | |
| ✓ 1 | No | | | | | |
| | ⁄es | | | | | |
| | | | | | | |
| | Explain here: | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

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| Fill in this information to identify your case: | | | | | | | |
|---|------------|-------------|------------------------------|--|--|--|--|
| Debtor 1 | Jerrilynn | | Dyson | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | | | |
| Case number (If known) | | | (State) | | | | |

Official Form 106Dec

| Check if this is an |
|---------------------|
| amended filing |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Pai | t1: Sign Below | | | | | | |
|-----|---|---|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | |
| | ✓ No | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | |
| | | | | | | | |
| | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary at | nd schedules filed with this declaration and | | | | | |
| | that they are true and correct. | | | | | | |
| X | /s/ Jerrilynn Dyson | x | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | |
| | Date 9/16/2016 | Date | | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | | |

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| Debtor 1 | Jerrilynn | | | Dyson | | | |
|-----------------------|---|----------------|--------------------------|---|--|-------------------|---|
| | First Nam | е | Middle Na | ame Last Nan | ne | | |
| Debtor 2 Spouse, i | f filing) First Nam | e | Middle Na | ame Last Nan | ne | | |
| Inited Sta | ates Bankruptcy C | Court for the: | Northern | District of Illino | | | |
| Case num If known) | ber | | | (Sta | | | |
|)ffici | al Form | 107 | | | | | Check if this amended filir |
| | | | ial Affairs | for Individua | als Filing fo | r Bankru | ptcy |
| | | | | | | | pplying correct information. If mmber (if known). Answer every |
| estion. | eeded, allach a | separate sne | et to this form. On | Title top of any additions | ai pages, write your na | ille and case nu | inber (il known). Answer every |
| art 1: | Give Details A | About You | r Marital Status | and Where You Liv | ved Before | | |
| | | | | | | | |
| Wi | nat is your curre | nt marital st | atus? | | | | |
| | Married | | | | | | |
| ✓ | Not married | | | | | | |
| | | | | | | | |
| . Du | ring the last 3 ye | ears, have yo | u lived anywhere o | other than where you live | e now? | | |
| . Du | ring the last 3 ye | ears, have yo | u lived anywhere o | other than where you live | e now? | | |
| . Du | No | • | · | other than where you live | | | |
| . Du | No | • | · | · | | | |
| . Du | No | • | · | · | | | Dates Debtor 2 lived there |
| Du ✓ | No Yes. List all of th | • | · | ars. Do not include where y Dates Debtor 1 lived | ou live now. Debtor 2: | | there |
| Du | No Yes. List all of the | • | · | ars. Do not include where y Dates Debtor 1 lived | ou live now. | r1 | |
| . Du | No Yes. List all of th Debtor 1: 7034 S. Harper | • | lived in the last 3 yea | ars. Do not include where y Dates Debtor 1 lived | Debtor 2: Same as Debto | r1 | there |
| . Du | No Yes. List all of the | • | lived in the last 3 yea | Dates Debtor 1 lived there | ou live now. Debtor 2: | r1 | there Same as Debtor 1 |
| . Du | No Yes. List all of the Debtor 1: 7034 S. Harper Number Street | e places you | lived in the last 3 yea | Dates Debtor 1 lived there From 01/2013 | Debtor 2: Same as Debto | r1 | there Same as Debtor 1 From |
| . Du | No Yes. List all of th Debtor 1: 7034 S. Harper | • | lived in the last 3 yea | Dates Debtor 1 lived there From 01/2013 | Debtor 2: Same as Debto Number Street | r 1 tate Zip C | there Same as Debtor 1 From To |
| . Du | No Yes. List all of the Debtor 1: 7034 S. Harper Number Street Chicago | e places you l | lived in the last 3 yea | Dates Debtor 1 lived there From 01/2013 | Debtor 2: Same as Debto Number Street | iate Zip C | there Same as Debtor 1 From To |
| . Du | No Yes. List all of the Debtor 1: 7034 S. Harper Number Street Chicago City | e places you l | lived in the last 3 year | Dates Debtor 1 lived there From 01/2013 | Debtor 2: Same as Debto Number Street City Si Same as Debto | iate Zip C | there Same as Debtor 1 From To ode |
| . Du | No Yes. List all of the Debtor 1: 7034 S. Harper Number Street Chicago | e places you l | lived in the last 3 year | Dates Debtor 1 lived there From 01/2013 To 01/2016 | Debtor 2: Same as Debto Number Street City Si | iate Zip C | there Same as Debtor 1 From To Ode Same as Debtor 1 |
| 2. Du | No Yes. List all of the Debtor 1: 7034 S. Harper Number Street Chicago City | e places you l | lived in the last 3 year | Dates Debtor 1 lived there From 01/2013 To 01/2016 From | Debtor 2: Same as Debto Number Street City Si Same as Debto | iate Zip C | there Same as Debtor 1 From To Ode Same as Debtor 1 From |
| 2. Du | No Yes. List all of the Debtor 1: 7034 S. Harper Number Street Chicago City | e places you l | lived in the last 3 year | Dates Debtor 1 lived there From 01/2013 To 01/2016 From | Debtor 2: Same as Debto Number Street City St Same as Debto Number Street | iate Zip C | there Same as Debtor 1 From To Ode Same as Debtor 1 From To To To To |

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| Deb | tor 1 | | | son | Case nu | umber (if known) | |
|--------|----------------------|--|--|----------------------------------|--|--|--|
| | | First Name Middle | | t Name | | | |
| Part | 2: | Explain the Sources of Your I | ncome | | | | |
| | Fill i | you have any income from employmenthe total amount of income you receive vities. If you are filing a joint case and you No Yes. Fill in the details. | d from all jobs and all bu | sinesse | es, including part-time | | ars? |
| | | | Debtor 1 | | | Debtor 2 | |
| | | | Sources of income Check all that apply. | (| Gross income before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | rom January 1 of current year until ne date you filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | - | \$16779.83 | Wages, commissions, bonuses, tips Operating a business | |
| | | or last calendar year: lanuary 1 to December 31, 2015 | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | - | \$38000.00 | Wages, commissions, bonuses, tips Operating a business | |
| | | or the calendar year before that: lanuary 1 to December 31, 2014 | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | - | \$15000.00 | Wages, commissions, bonuses, tips Operating a business | |
| ! (| nclu cene case | you receive any other income during to de income regardless of whether that income fit payments; pensions; rental income; into and you have income that you received to each source and the gross income from each source. | ome is taxable. Example: terest; dividends; money ogether, list it only once u | s of oth collecte inder De | er income are alimony; chi ed from lawsuits; royalties; ebtor 1. | and gambling and lottery winni | |
| | | | Debtor 1 | | | Debtor 2 | |
| | | | Sources of income Describe below. | Ī | Gross income from each source (before deductions and exclusions) | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | | From January 1 of current year until he date you filed for bankruptcy: | | <u>-</u> | | | |
| | | For last calendar year: January 1 to December 31, 2015) YYYY | | - - - | | | |
| | | For the calendar year before that: January 1 to December 31, 2014 YYYY | | <u> </u> | | | |
| | | | | _ | | | |

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| r 1 <u>Jerrily</u> First Na | | Middle Name | Dyson Last Name | Case nur | nber (if known) | |
|--------------------------------|---|-----------------------|---|--|---------------------------------|-----------------------------|
| : List (| Certain Pavmen | its You Made I | Before You Filed for | r Bankruptcv | | |
| | • | | | | | |
| re either [| Debtor 1's or Debto | or 2's debts prima | arily consumer debts? | | | |
| | either Debtor 1 nor marily for a persona | | | . Consumer debts are define | d in 11 U.S.C. § 101(8) as "inc | curred by an individual |
| Du | uring the 90 days bef | fore you filed for ba | nkruptcy, did you pay any o | creditor a total of \$6,425* or n | nore? | |
| | No. Go to line 7. | | | | | |
| | total amoun | t you paid that cred | ditor. Do not include payme | 25* or more in one or more pa ents for domestic support obl to an attorney for this bankru | igations, such as | |
| * 5 | Subject to adjustmen | t on 4/01/19 and ev | very 3 years after that for ca | ases filed on or after the date | of adjustment. | |
| Yes. De | ebtor 1 or Debtor 2 | or both have pri | imarily consumer debts | | | |
| – Dı | uring the 90 days bef | fore you filed for ba | ınkruptcy, did you pay any o | creditor a total of \$600 or mor | re? | |
| V | . | • | | | | |
| | that creditor | . Do not include pa | om you paid a total of \$600 ayments for domestic supp ayments to an attorney for | or more and the total amount obligations, such as child this bankruptcy case. | t you paid d support and | |
| | | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
| Credito | or's Name | | | | - | Mortgage |
| Numbe | er Street | | | | | Car Credit card |
| | | | | | | Loan repayment |
| City | State | Zip Code | | | | Suppliers or vendors |
| Oity | Oldic | Zip Oodc | | | | Other |
| Credito | or's Name | | | | | Mortgage |
| Numbe | er Street | | | | | Car |
| INGITIO | or Otteet | | | | | Credit card Loan repayment |
| | | | | | | Suppliers or |
| City | State | Zip Code | | | | vendors |
| | | | | | | Other Mortgogo |
| Credito | or's Name | | | | | ☐ Mortgage ☐ Car |
| Numbe | er Street | | | | | Credit card |
| - | | | | | | Loan repayment |
| City | State | Zip Code | | | | Suppliers or vendors |
| | | , , , , , , | | | | Other |

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| Debtor 1 | Jerrilynn First Name | Middle Name | | /son st Name | Case number (| (if known) |
|------------------------|--|------------------------|-------------------------------------|---|--|---|
| Insid corpo agen | Fithin 1 year before you filed for bankruptcy, did siders include your relatives; any general partners; proprations of which you are an officer, director, per- lent, including one for a business you operate as a lich as child support and alimony. | | relatives of any rson in control, o | general partners; par r owner of 20% or mo | tnerships of which y ore of their voting se | ou are a general partner; curities; and any managing |
| | No Yes. List all payments to | an insider. | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| - | Insider's Name | | | | | |
| Ī | Number Street | | | | | |
| - | City State | Zip Code | | | | |
| | Insider's Name | | | | | |
| İ | Number Street | | | | | |
| ; | City State | Zip Code | | | | |
| insid Includ | | aranteed or cosigned b | | / payments or trans | fer any property o | n account of a debt that benefited an |
| | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | | | | | | moude dealtors name |
| Ì | Insider's Name | | | | - | |
| į | Number Street | | | | | |
| - | City State | Zip Code | | | | |
| - | Insider's Name | | | | | |
| i | Number Street | | | | | |
| | City State | Zip Code | | | | |

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| First Name Middle Name Last Name Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modification contract disputes. No | |
|--|-----|
| Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modification contract disputes. No | |
| List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modification contract disputes. No | |
| Yes. Fill in the details. Case title | se |
| Case title Case number | ise |
| Case title Case number Case number Case title Case title Case title Case number Concluded | |
| Case number Court Name | |
| Case number Concluded Con | |
| Case title Case number | |
| Case title Court Name Case number Court Name NumberStreet Pending On appeal Concluded | |
| Case number NumberStreet Court Name On appeal Concluded | |
| Case number NumberStreet Concluded | |
| NumberStreet Considered | |
| City State Zip Code | |
| Ony Clair II-p coat | |
| Yes. Fill in the information below. Describe the property Date Value of the property | he |
| ALLY FINANCIAL 2015 Chevrolet Impala was repossessed 09/2016 \$310000 | |
| Creditor's Name | |
| 200 RENAISSANCE CTR Explain what happened | |
| Number Street | |
| ✓ Property was repossessed. Property was foreclosed. | |
| DETROIT Michigan 48243 Property was garnished. | |
| City State Zip Code Property was attached, seized, or levied. | |
| Describe the property Date Value of to property | he |
| Creditor's Name | |
| Explain what happened | |
| Number Street | |
| Property was repossessed. | |
| Property was foreclosed. | |
| City State Zip Code Property was garnished. Property was garnished. Property was attached, seized, or levied. | |

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| Deb | tor 1 | Jerrilynn | Dyson | Case number (if known) | | |
|------|----------|---|------------------------------|----------------------------------|-----------------------|--------------------|
| | | First Name Middle Name | Last Name | | | |
| 11. | | hin 90 days before you filed for bankruptcy, did ounts or refuse to make a payment because you | | ank or financial institution, se | t off any amour | nts from your |
| | ✓ | No Yes. Fill in the details. | | | | |
| | | | Describe the action the | | Date action was taken | Amount |
| | | Creditor's Name | | | | |
| | | Number Street | Last 4 digits of account n | umber: XXXX- | | |
| | | City State Zip Code | | | | |
| 12. | | nin 1 year before you filed for bankruptcy, was a ointed receiver, a custodian, or another official | | oossession of an assignee for | the benefit of c | reditors, a court- |
| | | No Yes | | | | |
| Pari | t 5: | List Certain Gifts and Contributions | | | | |
| 13. | | thin 2 years before you filed for bankruptcy, did | you give any gifts with a to | otal value of more than \$600 p | er person? | |
| | ✓ | No | , g , g | | | |
| | Ш | Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 | Describe the gifts | | Dates you | Value |
| | | per person | | | gave the gifts | |
| | | Person to Whom You Gave the Gift | | | | |
| | | Number Street | | | | |
| | | City State Zip Code | | | | |
| | | Person's relationship to you | | | | |
| | | Person to Whom You Gave the Gift | | | | |
| | | Number Street | | | | |
| | | City State Zip Code Person's relationship to you | | | | |
| | | | | | | |

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| Deb | tor 1 | Jerrilynn First Name | Middle Name | Dyson Last Name | Case number (if known) | |
|------|----------|--|-------------------------------|---|--|---------------------|
| | | Thorragine | Middle Name | Lastivanie | | |
| 14. | Witl | nin 2 years before you | filed for bankruptcy, did | you give any gifts or contribution | ons with a total value of more than \$ | 600 to any charity? |
| | ✓ | No | | | | |
| | | Yes. Fill in the details for | or each gift or contribution. | | | |
| | | Gifts or contribution that total more than | | Describe what you contribu | uted Date you contribute | Value |
| | | | | | | |
| | | Charity's Name | | • | | |
| | | | | | | |
| | | _ | | | | |
| | | Number Street | | | | |
| | | City Sta | ate Zip Code | | | |
| Part | 6: | List Certain Losse | es | | | |
| 10. | gam | bling? No Yes. Fill in the details. Describe the propert how the loss occurre | y you lost and | Describe any insurance co | | |
| | | now the loss occurre | :u | pending insurance claims on A/B: Property. | | iosi |
| | | | | | | |
| | | List Certain Paym | | | | |
| | | de any attorneys, bankr No Yes. Fill in the details. | uptcy petition preparers, or | credit counseling agencies for sen | rices required in your bankruptcy. | |
| | | | | Description and value of ar transferred | ny property Date paym or transfer was made | |
| | | Semrad Law Firm | | Attorney's Fee - 350.00 | 9/15/2016 | \$350.00 |
| | | Person Who Was Paid | | | | <u> </u> |
| | | 20 South Clark Street 2 Number Street | 28th Floor | | | |
| | | Number Street | | | | |
| | | | | | | |
| | | | nois 60606 | | | |
| | | City Sta | ate Zip Code | | | |
| | | Email or website addre | ess | | | |
| | | Person Who Made the | Payment, if Not You | | | |
| | | Person Who Was Paid | | | | |
| | | Number Street | | | | |
| | | City Sta | ate Zip Code | | | |
| | | Email or website addre | ess | | | |
| | | | | | | |

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| Deb | tor 1 | Jerrilynn | | Dyson | Case number (if known) | · | |
|-----|-------|--|--------------------------|---|--------------------------------|--|--------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | help | hin 1 year before you filed to you deal with your credito not include any payment or tra No Yes. Fill in the details. | rs or to make payment | s to your creditors? | our behalf pay or transfer | any property to anyo | one who promised to |
| | ш | res. I ili ili the details. | | | | | |
| | | | | Description and value of transferred | f any property | | Amount of payment |
| | | Person Who Was Paid | | | | | · |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | | Oity Otate | Zip Oodc | | | | |
| | Inclu | ordinary course of your bu ude both outright transfers and sfers that you have already list No Yes. Fill in the details. | d transfers made as secu | | a security interest or mortgaç | ge on your property). [| Oo not include gifts and |
| | | | | Description and value or property transferred | | y property or eceived or debts paid | Date d transfer was made |
| | | Person Who Received Tran | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| | | Person Who Received Tran | sfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to you | Zip Code | | | | |
| 19. | | hin 10 years before you file ese are often called asset-pro | | ou transfer any property to | a self-settled trust or simi | lar device of which y | ou are a beneficiary? |
| | | No Yes. Fill in the details. | | | | | |
| | _ | | | Description and value | of the property transferred | i | Date transfer was made |
| | | Name of trust | | | | | |

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| Debtor | | Jerrilynn First Name Middle | Name | Dyson Last Name | Case | e number (if known) | | |
|-------------------------|------|---|-------------------|--------------------------------|-----------------|-------------------------------|---|--|
| Part 8: | | ist Certain Financial Accour | | | xes. and | d Storage Units | | |
| 20. W m ln | /ith | in 1 year before you filed for bankrued, or transferred? de checking, savings, money market, oeratives, associations, and other finance | uptcy, were any r | financial accounts or inst | ruments h | neld in your name, or fo | | |
| Ē | = | No Yes. Fill in the details. | | st 4 digits of account mber | Type of instrun | f account or nent | Date account was closed, sold, moved, or | Last balance before closing or transfer |
| | | Person Who Was Paid | xx | XXX- | = | ecking vings | transferred | u ansiei |
| | | Number Street | | | | ney market okerage ner | | |
| | | Person Who Was Paid Number Street | XX | XX- | Sav | ecking vings ney market | | |
| | | | Code | | | okerage | | |
| | the | ou now have, or did you have within r valuables? No | າ 1 year before y | ou filed for bankruptcy, a | ny safe de | eposit box or other dep | ository for securi | ities, cash, or |
| L | _ | Yes. Fill in the details. | Who | else had access to it? | | Describe the conte | nts | Do you still have it? |
| | | Name of Financial Institution | Name | e | | | | ☐ No ☐ Yes |
| | | Number Street | Numl | ber Street | | | | 1e3 |
| | | | City | State Zip | Code | | | |
| | | City State Zip C | | | | | | |
| 22. H | 7 | e you stored property in a storage u No Yes. Fill in the details. | nit or place othe | er than your home within | 1 year befo | ore you filed for bankr | uptcy? | |
| _ | _ | res. I ill ill the details. | Who | else had access to it? | | Describe the conte | nts | Do you still have it? |
| | | Name of Storage Facility | Name | е | | | | ☐ No ☐ Yes |
| | | Number Street | Numl | | Code | | | П ₁₆₂ |
| | | City State Zip Co | | Sidio Zi | | | | |

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| ebtor ' | | Dyson | Cas | e number (if known) | | | | |
|-------------------|---|--------------------------------|--------------------------|--|----------------|--|--|--|
| | First Name Middle Name | Last Name | | | | | | |
| rt 9: | Identify Property You Hold or Con | trol for Someone | Else | | | | | |
| , D. | ver hold an agricul and property that agree | ana alaa ayyaa2 laalyy | de environemento veci. L | | a turnat fau | | | |
| | o you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust f omeone. | | | | | | | |
| | L vi. | | | | | | | |
| ¥ | No | | | | | | | |
| <u> </u> | Yes. Fill in the details. | Mile and in the manner | | Describe the contents | Value | | | |
| | | Where is the prop | erty? | Describe the contents | Value | | | |
| | Owner's Name | Number Street | | | | | | |
| | | | | | | | | |
| | Number Street | | | | | | | |
| | | | | | | | | |
| | | City Sta | ate Zip Code | | | | | |
| | City State Zip Code | - | | | | | | |
| owt 40 | Cive Details About Environments | l Information | | | | | | |
| art 10 | Give Details About Environmenta | ii iiiiOi iiiatiOii | | | | | | |
| or the | purpose of Part 10, the following definitions app | ly: | | | | | | |
| • | Environmental law means any federal, state, or | local statute or regulation | concerning pollution, c | contamination, releases of | | | | |
| | hazardous or toxic substances, wastes, or mate | rial into the air, land, soil, | surface water, groundw | vater, or other medium, | | | | |
| | including statutes or regulations controlling the | cleanup of these substan | ces, wastes, or materia | ત્રી. | | | | |
| - | Site means any location, facility, or property as de | efined under any environr | nental law, whether you | now own, operate, or utilize it | | | | |
| | or used to own, operate, or utilize it, including d | isposal sites. | | | | | | |
| - | Hazardous material means anything an environr | mental law defines as a ha | azardous waste, hazard | ous substance, | | | | |
| | toxic substance, hazardous material, pollutant, o | contaminant, or similar ter | m. | | | | | |
| Report | all notices, releases, and proceedings that you k | now about, regardless of | when they occurred. | | | | | |
| • | | | • | | | | | |
| I. Ha | s any governmental unit notified you that y | ou may be liable or pot | entially liable under o | or in violation of an environmental law? | | | | |
| Ī.7 | l No | | | | | | | |
| F | Yes. Fill in the details. | | | | | | | |
| | | Governmental uni | it | F | | | | |
| | | | | Environmental law, it you know it | Date of | | | |
| | | | | Environmental law, if you know it | Date of notice | | | |
| | | | | Environmental law, if you know it | | | | |
| | Name of site | Governmental unit | | Environmental law, if you know it | | | | |
| | Name of site Number Street | Governmental unit | | Environmental law, if you know it | | | | |
| | | | | Environmental law, if you know it | | | | |
| | | | ite Zip Code | Environmental law, if you know it | | | | |
| | Number Street | Number Street | ite Zip Code | Environmental law, if you know it | | | | |
| | | Number Street | ıte Zip Code | Environmental law, if you know it | | | | |
| i. Ha | Number Street | Number Street City Sta | | Environmental law, if you know it | | | | |
| i. Ha | Number Street City State Zip Code ave you notified any governmental unit of ar | Number Street City Sta | | Environmental law, if you know it | | | | |
| 5. Ha ☑ | Number Street City State Zip Code ve you notified any governmental unit of ar | Number Street City Sta | | Environmental law, if you know it | | | | |
| 5. На | Number Street City State Zip Code ave you notified any governmental unit of ar | Number Street City Sta | s material? | | notice | | | |
| 5. Ha ☑ | Number Street City State Zip Code ve you notified any governmental unit of ar | Number Street City Sta | s material? | Environmental law, if you know it | notice Date of | | | |
| 5. На ☑ | Number Street City State Zip Code ve you notified any governmental unit of ar | Number Street City Sta | s material? | | notice | | | |
| 5. На | Number Street City State Zip Code ve you notified any governmental unit of ar | Number Street City Sta | s material? | | notice Date of | | | |
| 5. На <u>Г</u> | Number Street City State Zip Code Ive you notified any governmental unit of ar No Yes. Fill in the details. Name of site | Number Street City Sta | s material? | | notice Date of | | | |
| 5. Ha | Number Street City State Zip Code Ive you notified any governmental unit of ar No Yes. Fill in the details. | Number Street City Sta | s material? | | notice Date of | | | |
| i. Ha | Number Street City State Zip Code Ive you notified any governmental unit of ar No Yes. Fill in the details. Name of site | Number Street City Sta | s material? | | notice Date of | | | |
| 5. Ha | Number Street City State Zip Code Ive you notified any governmental unit of ar No Yes. Fill in the details. Name of site | Number Street City Sta | s material? | | notice Date of | | | |

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| Deb | otor 1 | Jerrilynn | | | Dyson | Case | number (if known) | |
|------|--------------|-----------------------|---------------------|------------------------|-------------------------------|-----------------------|--|--------------------|
| | | First Name | | Middle Name | Last Name | | | |
| 26. | Hav | e you been a party | / in any judici | al or administra | tive proceeding under | any environmenta | al law? Include settlements and orders | s. |
| | ✓ | No | | | | | | |
| | | Yes. Fill in the deta | ils. | | | | | |
| | | | | (| Court or agency | | Nature of the case | Status of the case |
| | | Case title | | | | | | |
| | | | | | Court Name | | | Pending |
| | | - | | | Sourt Name | | | On appeal |
| | | Case number | | 1 | Number Street | | | Concluded |
| | | | | Ō | City State | Zip Code | | |
| | | مینی م | | | | | | |
| Part | t 11: | Give Details A | bout Your | Business or | Connections to Ar | ny Business | | |
| 27. | With | nin 4 vears before | you filed for l | hankruptev did v | vou own a business or | have any of the fo | ollowing connections to any business | ? |
| | ****** | | you mou for i | sama aptoy, ara | you own a business of | nave any or the it | onowing connections to any business | • |
| | | A sole propriet | tor or self-emp | loyed in a trade, p | profession, or other activit | y, either full-time o | r part-time | |
| | | A member of a | a limited liability | y company (LLC) | or limited liability partners | ship (LLP) | | |
| | | A partner in a | partnership | | | | | |
| | | An officer, dire | ctor, or manag | jing executive of a | a corporation | | | |
| | | | _ | _ | securities of a corporation | n | | |
| | | _ | | | · | | | |
| | \mathbf{Y} | No. None of the abo | | | | | | |
| | Ш | Yes. Check all that | apply above ar | nd fill in the details | below for each business | | | |
| | | | | | Describe the natu | ire of the busines | | |
| | | | | | | | include Social Security nu | imber or ITIN. |
| | | Duninga Nama | | | _ | | EIN: | |
| | | Business Name | | | | | | |
| | | Number Street | | | _ | | Dates business existed | |
| | | Number Street | | | Name of account | ant or bookkeepe | er | |
| | | City | State | Zip Code | _ | | From To | |
| | | C, | Clair | p | | | | |
| | | | | | | | | |
| | | | | | D " " | | | |
| | | | | | Describe the natu | ire of the busines | Employer Identification n include Social Security nu | |
| | | | | | | | | iniber of frint. |
| | | Business Name | | | _ | | EIN: | |
| | | | | | | | | |
| | | Number Street | | | - Name (| | Dates business existed | |
| | | | | | Name of account | ant or bookkeepe | | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | Describe the natu | ire of the husines | ss Employer Identification n | umber Do not |
| | | | | | Describe the natt | or the busines | include Social Security nu | |
| | | | | | | | EIN: | |
| | | Business Name | | | _ | | L113. | |
| | | | | | _ | | Detection to the second | |
| | | Number Street | | | Name of account | ant or hookkeens | Dates business existed | |
| | | | | | | ant or bookkeepe | | |
| | | City | State | Zip Code | | | From To | |
| | | | | | | | | |
| | | | | | | | | |

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| Deb | tor 1 | Jerrilynn | | Dyson | Case number (if known) | | |
|------|--|---|-------------------------------|-------------------------------|--|--|--|
| | | First Name | Middle Name | Last Name | | | |
| 28. | | nin 2 years before you f litors, or other parties. | filed for bankruptcy, did you | give a financial statement | to anyone about your business? Include all financial institutions, | | |
| | ✓ | No Yes. Fill in the details bel | low. | | | | |
| | | | | Date issued | | | |
| | | Name | | MM/DD/YYYY | | | |
| | | Number Street | | | | | |
| | | City St | ate Zip Code | | | | |
| Part | 12: | Sign Below | | | | | |
| 1 | I have read the answers on this <i>Statement of Financial Affairs</i> and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | | |
| | | | ynn Dyson | | X | | |
| | | Signature of | Debtor 1 | | Signature of Debtor 2 | | |
| | | Date 9/16/2 | 2016 | | Date | | |
| ı | Did y | ou attach additional pa | ges to Your Statement of Fi | nancial Affairs for Individu | uals Filing for Bankruptcy (Official Form 107)? | | |
| | ✓ N | No | | | | | |
| İ | | ′es | | | | | |
| | Did y | ou pay or agree to pay | someone who is not an atto | rney to help you fill out bar | nkruptcy forms? | | |
| | ✓ N | No | | | | | |
| | | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A–2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Revised as of 4/20/15)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.

- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the chapter 7 case for any unpaid fees and expenses, pursuant to section 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate

tasks and functions for the attorney amd support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.

- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.



10 27 cr

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4000.00
- 2. In addition, the debtor will pay the filing fee required in the case of \$ 310.00
- 3. Before signing this agreement, the attorney has received, \$ 350.00 toward the flat fee, leaving a balance due of \$ 3650.00 ; and \$ 61.76 for expenses, leaving a balance due for the filing fee of \$ 310.00

4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:

Signed:

Debtor(s)

Attorney for the Debtor(s)

Do not sign this agreement if the amounts are blank.

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Jerrilynn Dyson | Northern District | Case No. | |
|-------|--|-------------------------------|----------------------------------|--------------------------------|
| - | Debtor | | Case No. | (If known) |
| | | | Chapter | Chapter 13 |
| | DISCLOSURE OF C | OMPENSATION | OF ATTORNEY FO | OR DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and F that compensation paid to me within a services rendered or to be rendered or is as follows: | one year before the filing of | the petition in bankruptcy, or | agreed to be paid to me, for |
| | For legal services, I have agreed to a | accept | | \$4,000.0 |
| | Prior to the filing of this statement I h | nave received | | \$350.0 |
| | Balance Due | | | \$3,650.0 |
| 2. | The source of the compensation paid | to me was: | | |
| | Debtor | Other (specify) | | |
| 3. | The source of the compensation paid | to me is: | | |
| | ✓ Debtor | Other (specify) | | |
| 4. | I have not agreed to share the ab | | on with any other person unles | s they are |
| | I have agreed to share the above members or associates of my law the people sharing in the compen | w firm. A copy of the agree | | |
| 5. | In return for the above-disclosed fee, a. Analysis of the debtor's financ bankruptcy; | _ | - | |
| | b. Preparation and filing of any p | petition, schedules, stateme | ents of affairs and plan which m | nay be required; |
| | c. Representation of the debtor a | at the meeting of creditors a | and confirmation hearing, and a | any adjourned hearings thereof |
| | d. Representation of the debtor i | n adversary proceedings a | nd other contested bankruptcy | matters; |
| 6. | By agreement with the debtor(s), the | above-disclosed fee does r | not include the following servic | es: |
| | | | | |
| | | CERTIFICAT | ION | |
| | I certify that the foregoing is a complet ne debtor(s) in this bankruptcy proceed | | nent or arrangement for payme | ent to me for representation |
| | 9/16/2016 | | /s/ Mark Bernachea | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| | Debtor(s) | Case No | | | |
|-------|--|--|---|-------|--|
| | | Chapter. | Chapter13 | _ | |
| | VERIFICATION OF CREDITOR MATRIX | | | | |
| The a | above named Debtors hereby verify that | the attached list of creditors is true | and correct to the best of their knowle | edge. | |
| | 0/10/040 | //5 | | | |
| Date: | 9/16/2016 | /s/ Dyson, Jerrilyr | in | _ | |
| | | Dyson, Jerrilynn Signature of Debi | or | | |

ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT , MI 48243 USA

Capital One PO Box 71083 POC Notice: Amanda Matchett Charlotte , NC 28272 USA

DISCOVER FIN SVCS LLC PO BOX 15316 WILMINGTON , DE 19850 USA

DISCOVERBANK POB 15316 WILMINGTON , DE 19850 USA

cb/carson PO BOX 15521 Wilmington , DE 19805 USA

COMENITY BANK/CARSONS 1314 PINELOG ROAD AIKEN , SC 29803 USA

KAY JEWELERS 375 GHENT RD FAIRLAWN , OH 44333 USA

KAY JEWELERS 375 GHENT RD FAIRLAWN , OH 44333 USA

CBE GROUP 131 TOWE PARK DR SUITE 1 WATERLOO, IA 50702 USA

KOHLS/CAPONE PO Box 3004 Milwaukee , WI 53201 USA

KOHLS/CAPONE PO Box 3004 Milwaukee , WI 53201 USA

PEOPLES ENGY 200 EAST RANDOLPH Case 16-29543 Doc 1 Filed 09/16/16 Entered 09/16/16 11:53:48 Desc Main Document Page 64 of 70

CHICAGO , IL 60601 USA PEOPLES ENGY 200 EAST RANDOLPH CHICAGO , IL 60601 USA

City of Chicago Parking 121 N. LaSalle St # 107A Chicago , IL 60602 USA

Peoples Gas 200 E. Randolph Chicago , IL 60601 USA

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168 USA

Progressive Leasing 10619 South Jordan Gateway # 100 South Jordan , UT 84095 USA

PLS Loan Store 1215 E 87th St Chicago , IL 60619 USA

Rush Hospital 1700 W Van Buren # 161 Chicago , IL 60612 USA Case 16-29543 Doc 1 Filed 09/16/16 Entered 09/16/16 11:53:48 Desc Main Document Page 66 of 70

| First Name | Middle Name | Last Name | |
|---|--|---|--|
| Part 6: Answer These Q | luestions for Reporting Purp | | |
| 16. What kind of debts do you have? | 16a. Are your debts prima 101(8) as "incurred by ☐ No. Go to line 16b. ☐ Yes. Go to line 17. 16b. Are your debts prima obtain money for a bus investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. | rily consumer debts? Consumer debt an individual primarily for a personal, f | family, or household purpose." are debts that you incurred to eration of the business or |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | paid that funds will be ava | oter 7. Go to line 18. 7. Do you estimate that after any exempt property allable to distribute to unsecured creditors? | is excluded and administrative expenses are |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 0. How much do you estimate your liabilities to be? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | |
| | and correct. If I have chosen to file under 11,12, or 13 of title 11, United choose to proceed under Chap If no attorney represents me a me fill out this document, I had I request relief in accordance I understand making a false st | and I did not pay or agree to pay some ve obtained and read the notice require with the chapter of title 11, United State tatement, concealing property, or obtaicase can result in fines up to \$250,000 52, 1341, 1519, and 3571. | eed, if eligible, under Chapter 7, vailable under each chapter, and I one who is not an attorney to help ed by 11 U.S.C. § 342(b). es Code, specified in this petition. ning money or property by fraud in the company of the company o |

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| Fill in this info | mation to identify your ca | se: | | | |
|------------------------|---|----------------------------------|--|---|--|
| Debtor 1 | Jerrilynn | | Dyson | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filir | ^{ig)} First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | |
| _ | | | (State) | | |
| Case number (If known) | | MM. | | | |
| | | | | | Charle Male in an |
| Official | Form 106De | C C | | | Check if this is an amended filing |
| | | | | | , and the second |
| Declara | tion About a | n Individual D | ebtor's Sched | ules | 12/15 |
| f two married | people are filing togeth | er, both are equally respor | nsible for supplying correct | information. | |
| Va | his &s | City to an a fermion of the last | | | |
| nonell er erer | ills form whenever you | tie bankruptcy scriedules | or amended schedules, Ma | king a false statement, concealing prop | erty, or obtaining |
| \$§ 152, 1341, 1 | | tion with a bankruptcy cas | e can result in fines up to \$ | 250,000, or imprisonment for up to 20 ye | ears, or both. 18 U.S.C. |
| 33 102, 10-1, 1 | 515, and 557 1. | | | | |
| Part 1: Sign | n Relow | | | | |
| Tartir Olg | | | Property and the second | | |
| Did you p | oay or agree to pay som | eone who is NOT an attorn | ey to help you fill out bankr | uptcy forms? | |
| √ No | | | | | THE PART AND ADMINISTRATION OF |
| Season | | | | | |
| Yes. | Name of person | | | etition Preparer's Notice, Declaration, and | We down to the |
| | | | Signature (Official Fo | ım 119). | |
| | | * | • | | 1 |
| | | | | | |
| | | | | | |
| | | | | | |
| Under pe | naity of perjury, I declar are true and correct. | e that I have read the sumr | nary and schedules filed wi | th this declaration and | |
| | | 144 | | | |
| /s/ Jerrily | | TVLI | * | | |
| Signature | of Debtor 1 | | Signature | of Debtor 2 | |
| Date 9/16 | /2016 | Commence | Date | | |

MM/DD/YYYY

MM/DD/YYYY

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| Debtor 1 | Jerniynn First Name | Middle Name | Dyson Last Name | Case number (if known) |
|------------|--|---|--|---|
| | the think the think to the specific for the transformation of the second statement of the second state | u filed for bankruptcy, did | and for the brightest terminal and an expension of the contract and the contract and contract and the contra | ent to anyone about your business? Include all financial institutions, |
| <u> </u> | No Yes. Fill in the details | pelow. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | <u>-</u> |
| | Number Street | *************************************** | | |
| | City | State Zip Code | <u></u> | |
| art 12: | Sign Below | | | |
| true | and correct. I unders | tand that making a false st | atement, concealing prope | ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | *************************************** | of Debtor 1 | | Signature of Debtor 2 |
| | Date 9/1 | 6/2016 | | Date |
| Did y | ou attach additional | pages to Your Statement o | of Financial Affairs for Indiv | riduals Filing for Bankruptcy (Official Form 107)? |
| ا ا | No | | | , , , , |
| homes - | res . | | | |
| Did y | ou pay or agree to pa | y someone who is not an a | attorney to help you fill out | bankruptcy forms? |
| \ <u>\</u> | No | | | |
| | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, |
| | | | | Declaration, and Signature (Official Form 119). |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Dyson, Jerrilynn | Case No | | | | | | | |
|--------|--|--|--|--|--|--|--|--|--|
| | Debtor(s) | 0030 140. | | | | | | | |
| | | Chapter. | Chapter13 | | | | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | | | | |
| | The above named Debtors hereby verify that | the attached list of creditors is true | and correct to the best of their knowledge | | | | | | |
| Date: | 9/16/2016 | /s/ Dyson, Jerrily | | | | | | | |
| | | Dyson, Jerrilynn Signature of Deb | | | | | | | |

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| Debt | or 1 | Jerrilynn First Name | Middle Name | Dyson Last Name | Case number (if known) | | | | | |
|---------------|--|---|--------------------------------------|--|---|--|--|--|--|--|
| 16. | Calculate the median family income that applies to you. Follow these steps: | | | | | | | | | |
| | 16a | . Fill in the state in which | h you live. | Illinois | | | | | | |
| | 16b | . Fill in the number of pe | eople in your household. | 3 | | | | | | |
| | 16c. Fill in the median family income for your state and size of household To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. | | | | | | | | | |
| 17. | Ho | w do the lines compare | e? | | | | | | | |
| | 17a | 7a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Disposable Income (Official Form 122C-2). | | | | | | | | |
| | 17b | 1325(b)(3). Go to | | | ox 2, Disposable income is determined under 11 U.S.C. § ome (Official Form 122C-2). On line 39 of that form, copy | r | | | | |
| Part | 3: | Calculate Your Co | mmitment Period Unde | er 11 U.S.C. §1325 | (b)(4) | • | | | | |
| 18. | Cop | y your total average n | nonthly income from line 11 | | | \$1,915.84 | | | | |
| 19. | Dec com | Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. | | | | | | | | |
| | 19a | . If the marital adjustmer | nt does not apply, fill in 0 on line | 9 19a. | | -\$0.00 | | | | |
| | 19b. | Subtract line 19a from | m line 18. | | | \$1,915.84 | | | | |
| 20. | Cal | culate your current mo | nthly income for the year. F | ollow these steps: | | | | | | |
| | 20a. | Copy line 19b. | | | | \$1,915.84 | | | | |
| | | Multiply by 12 (the num | ber of months in a year). | | | x 12 | | | | |
| | 20b. | The result is your curre | ent monthly income for the year | for this part of the form. | | \$22,990.08 | | | | |
| | 20c. | Copy the median family | y income for your state and size | e of household from line | 16c. | \$72,429.00 | | | | |
| 21. | Hov | ow do the lines compare? | | | | | | | | |
| | V | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. | | | | | | | | |
| | | Line 20b is more than or commitment period is 5 y | | rwise ordered by the cou | art, on the top of page 1 of this form, check box 4, The | | | | | |
| art 4 | : 3 | Sign Below | | | | | | | | |
| | | By signing here, I declar | re under penalty of perjury that | the information on this s | tatement and in any attachments is true and correct. | | | | | |
| | | /s/ Jerrilynn Dyse Signature of Debtor | | _ 🗶 | Signature of Debtor 2 | | | | | |
| | | Date <u>9/16/2016</u> MM/DD/YYY | ~ <i>V</i> | [| Date | | | | | |
| | | י אין /טט/ואוויי | 1 1 | | MM/DD/YYYY | | | | | |
| | If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above. | | | | | | | | | |
| ************* | NAMES AND DESCRIPTIONS | | | de maria de la composição de la composição de la composição de la composição de la composição de la composição | ************************************** | olomorum a Karonamar - Alexandron Nova carrona Antonomorum carrona and annomorum | | | | |